

 **Department of Computer Science & Electrical Engineering**

**COURSE EQUIVALENCY REQUEST FORM**

**(For Ph.D. Students Only)**

**To: GRADUATE PROGRAM DIRECTOR**

**Program: CMPE\_\_\_\_\_ CMSC \_\_\_\_ ENEE \_\_\_\_**

**Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I request to transfer the following course(s) taken at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **(Name of University(s)**

**to UMBC as follows:**

 **Course Number UMBC Equivalent**

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Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Advisor Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Advisor Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**FOR GRADUATE PROGRAM DIRECTOR’S USE ONLY:**

**Approved All \_\_\_\_\_\_\_\_\_\_\_ Approved Partial (Number or Credits approved) \_\_\_\_\_\_\_\_\_ Not Approved \_\_\_\_\_\_\_\_\_\_\_\_**

**Graduate Program Director’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Revised by Keara Fliggins: June 2018***